PTO/SB/17 (12-04)

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Effective on 12/08/2004.		Complete if Known				
es pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818)		Application Number 09/628,023				
ſ : ::- ::- ::- ::- ::- ::- ::- ::- ::		Filing Date July 28, 200				
F	or FY 2005	First Named Inventor	Shigeo YAMAGATA et al.			
Applicant claims small entity status. See 37 C.F.R. 1.27		Examiner Name	T. Pham			
TOTAL AMOUNT OF PAYMENT (\$)		Art Unit 2624 Attorney Docket No. 03500.0146				
METHOD OF PAYMENT (check all that apply)						
Check Credit Card Money Order Money Other (please identify): Deposit Account Deposit Account Number: 06-1205 Deposit Account Name: Eltzpatrick, Cella, Harper & Scinto						
X Deposit Account Deposit Account Number: 06-1205 Deposit Account Name: Fitzpatrick, Cella, Harper & Scinto For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) under 37 C.F.R. 1.16 and 1.17 Charge fee(s) indicated below, except for the filing fee X Credit any overpayments						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
FEE CALCULATION						
1. BASIC FILING, SE	ARCH, AND EXAMINATION FEES	DOUIEEE EV	MAINIATIONI EEE	c		
	FILING FEES SEAF Small Entity	RCH FEES EXA Small Entity	AMINATION FEE. Small Entity	5		
Application Type	Fee (\$) Fee (\$			<u>Fees Paid (\$)</u>		
Utility Design	300 150 500 200 100 100					
Plant	200 100 300	150 16				
Reissue	300 150 500	250 60	0 300			
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple dependent claims Small Entity Fee(\$) Fee(\$) 25 25 20 100 360 180						
Total Claims	Extra Claims Fee (\$) Fee Pa	id (\$) Multip	ole Dependent Clai	<u>ms</u>		
20 - 32 = HP = highest number	$\frac{0}{\text{of total claims paid for, if greater than 20}} = \frac{0}{20}$	<u>F</u>	<u>ee(\$)</u> <u>F</u>	ee Paid (\$)		
Indep. Claims	Extra Claims Fee(\$)	Fee Paid (\$)				
5 - 6 = HP = highest number of	0 x 200.00 = of independent claims paid for, if greater th	0 nan 3				
 APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). 						
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)						
100 = / 50 = (round up to a whole number) x =						
4. OTHER FEE(S) Fees Paid (\$)						
Non-English Specification, \$130 fee (no small entity discount)						
Other:						
SUBMITTED BY			. <u>-</u>			
Signature		Registration No.	T	Telephone		
· 	15. MIN	(Attorney/Agent)	36,570	202-530-1010		
Name (Print/Type)	Brian L. Klock			Date:		



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re A	pplication of:)	
	•	:	Examiner: T. Pham
Shigeo YAMAGATA, ET AL.			
Ü	•	:	Group Art Unit: 2624
Appln. No.: 09/628,023)	
		:	
Filed: July 28, 2000)	
		:	
For:	IMAGE PROCESSING SYSTEM)	
	FOR PREVENTING FORGERY	:	
	(AS AMENDED))	June 24, 2005

Mail Stop: AMENDMENT Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450

<u>AMENDMENT</u>

Sir:

In response to the Office Action dated March 24, 2005, please amend the application as indicated below.